FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, [| D.C. | 20549 |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO | OVAL |
|------------------------|-----------|
| OMB Number: | 3235-0287 |
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| hours per response: | 0.5 |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* <u>Tapiero Jacques</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol LILLY ELI & CO [LLY] | | | | | | | | | | | licable) | g Perso | Person(s) to Issuer | | |
|---|--|---|---------|-----------------|------|--|--|-----|-------------------|---------------------------|--------------------|-----------------------|---|--------------------------------------|---|-------------------------------|--|--|----------------------------------|--|--|
| (Last) | (Fii ORPORAT | est) (1 E CENTER | Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/25/2011 | | | | | | | | | X | belov | er (give title v) &Pres., Emergin | | Other (specify below) ng Markets | | |
| (Street) INDIANAPOLIS IN 46285 (City) (State) (Zip) | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Indiv _ine) X | Forn | or Joint/Group Filing (Check Applicable rm filed by One Reporting Person rm filed by More than One Reporting rson | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | Execution Date, | | 3. Transaction Disposed Of (D) (Instr. 3, 0) 8) | | | | 4 and Secu Bene Own | | cially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | | | | | |
| | | | | | | | Code | v | Amount (A) or (D) | | Pric | е | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | | | | |
| Common Stock 01/25/ | | | | /2011 | 2011 | | A | | 16,670 | | A | \$34 | 4.73 | 3 28,026 | | D | | | | | |
| Common Stock | | | | | | | | | | | | | | | | 14,328 | | (1) | by wife | | |
| Common Stock | | | | | | | | | | | | | | 2,123 | | I | | 401(k) | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | Exercise (Month/Day/Year) if any Code (Instr. 8) Code (Instr. 8) Securitie Acquirec | | | | rative rities ired r osed) | 6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) 7. Title and Amount of Securities Underlying Derivative Security (Instand 4) | | | | | nstr. 3 | Deri | rice of vative urity tr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ow For Oir or (I) | 0. Ownership Form: Direct (D) or Indirect I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | Code | v | (A) | (D) | Date Exercis | | Expiration Date | Title | or Nu of | nount mber ares | | | | | | | |

Explanation of Responses:

1. Reporting person disclaims beneficial ownership of these shares.

Remarks:

Bronwen Mantlo for Jacques Tapiero, authorization on file

01/27/2011

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.